

(Del. Rev. 5/2014) Pro Se Employment Discrimination Complaint

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE



TONYA MARIE MANNINA

(Name of Plaintiff or Plaintiffs)

v.

Civ. Action No. 18 - 693
(To be assigned by Clerk's Office)

SAFEWAY Company

(Name of Defendant or Defendants)

COMPLAINT FOR
EMPLOYMENT DISCRIMINATION
(Pro se)

Jury Demand?

☒ Yes
☐ No

1. This action is brought pursuant to (check all spaces that apply):

- ☐ Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. §§ 2000e, *et seq.*, for employment discrimination on the basis of race, color, religion, sex, or national origin.
- ☐ Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. §§ 621, *et seq.*, for employment discrimination on the basis of age. My year of birth is: _____.
- ☐ Rehabilitation Act of 1973, as amended, 29 U.S.C. §§ 701, *et seq.*, for employment discrimination on the basis of a disability by an employer which constitutes a program or activity receiving federal financial assistance.
- ☒ Americans with Disabilities Act of 1990, as amended, 42 U.S.C. §§ 12101, *et seq.*, for employment discrimination on the basis of disability.

2. Plaintiff resides at 2342 TAGGART COURT
Wilmington, NEW CASTLE COUNTY DELAWARE, 19810
(City) (County) (State) (Zip Code)

(Area Code) (Phone Number) Attach additional sheets if more than one Plaintiff.

3. Defendant resides at, or its business is located at 2522 FOULK ROAD
Wilmington, NEW CASTLE COUNTY DELAWARE, 19810
(City) (County) (State) (Zip Code)

Attach additional sheets if more than one Defendant.

Please note that I was AWARE OF AND Complied With, the 180 DAY DEADLINE IN REGARDS to filing a complaint w/ the EEOC. But, THE EEOC STATES that they will consider Harassment/Discrimination Prior To the 180day deadline, if it is relevant. THE EEOC STATES that this IS THEIR ONLY EXCEPTION. My complaint Fits this criteria with NO Question.

4. The discriminatory conduct occurred in connection with plaintiff's employment at, or application

to be employed at, defendant's SAFEWAY place of business
(Defendant's Name)
located at 2522 FOULK ROAD
(Street Address)
Wilmington NEWCASTLE DE 19810
(City) (County) (State) (Zip Code)

7.1.17 was the isolated date that I was Harassed AND



5. The alleged discriminatory acts occurred on 1 July 2017
(Day) (Month) (Year)
(THE FINAL DISCRIMINATORY ACT 7.1.17)

6. The alleged discriminatory practice ☐ is ☒ is not continuing. ongoing the entire TIME I WAS EMPLOYED

7. On NON-APPLICABLE Plaintiff filed charges BY SAFEWAY, By the Defendant, At the HANDS OF MY Immediate Supervisor Julie Fields
(Day) (Month) (Year)

Discriminated Against as a result of me

with the Department of Labor of the State of Delaware: NON-APPLICABLE
(Agency)

(Street Address) (City) (County)
(State) (Zip Code), regarding defendant's alleged discriminatory conduct.

Breaking my finger

8. On Prior to 12/27/17 2017 Plaintiff filed charges
(Day) (Month) (Year)

on 6-28-17.

with the Equal Employment Opportunity Commission of the United States regarding defendant's alleged discriminatory conduct. At 3:38 PM ON 12/27/2017, I received A CALL FROM THE EEOC TO FOLLOW UP ON THE receipt of my submitted Formal complaint. This phone call was scheduled for

(THIS WAS NOT AT WORK so it is A NON

9. The Equal Employment Opportunity Commission issued the attached Notice-of-Right-to-Sue

workman's comp

letter which was received by plaintiff on: 16 FEB 2018
(Day) (Month) (Year)

issue.

So, 7-1-17

(NOTE: ATTACH NOTICE-OF-RIGHT-TO-SUE LETTER TO THIS COMPLAINT.)

was a result

10. The alleged discriminatory acts, in this suit, concern:

of my temporary

- A. ☐ Failure to employ plaintiff.
B. ☐ Termination of plaintiff's employment. Plaintiff was terminated from employment on the following date: _____
C. ☐ Failure to promote plaintiff. Plaintiff was refused a promotion on the following date: _____

Physical Disability.

- D. ☒ Other acts (please specify): I was harassed/discriminated against, verbally, mentally & emotionally abused from the day I started working @ Safeway. I was belittled, felt awkward, alienated, screamed @, humiliated in front of other employees, insulted, called a terrible employee, etc.

HOWEVER, MY

Harassment, abuse,

as a result of my

Permanent mental

Disability (I have

been diagnosed with

Bi-polar

Disorder)

11. The conduct of Defendant(s) was discriminatory because it was based on (check all that apply): etc.

(JAN. 2006), Started a most

2

Immediately from the day that

I started working there (2.19.17).

It was continuous and ongoing.

To come back to work A.S.A.P. or lose my job, w/ a Broken finger, then Harassed & screamed @, was the Final straw on 7.1.17

The Abuse as a result of being forced

* Please note that the Plaintiff is listing such relief that may be appropriate, but are undecided @ this time as I am seeking council a.s.a.p and I believe that she/he will have a better knowledge of what relief may be appropriate.

- A. ☐ Plaintiff's race
- B. ☐ Plaintiff's color
- C. ☐ Plaintiff's sex
- D. ☐ Plaintiff's religion
- E. ☐ Plaintiff's national origin
- F. ☐ Plaintiff's age
- G. ☒ Plaintiff's disability

12. A copy of the charges filed with the Department of Labor of the State of Delaware and/or the Equal Employment Opportunity Commission is attached to this complaint and is submitted as a brief statement of the facts of plaintiff's claim.

Please Note THAT I HAVE INCLUDED ONLY THE DOCUMENTS Relevant To filing this complaint.
(NOTE: ATTACH A COPY OF THE CHARGES FILED WITH THE DEPARTMENT OF LABOR OF THE STATE OF DELAWARE AND/OR THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION OF THE UNITED STATES TO THIS COMPLAINT.) * I HAVE NOT INCLUDED ALL OF THE DOCUMENTS SENT TO EEOC UNTIL NEEDED.

Punative DAMAGES AS A RESULT OF
limited to (check all that apply):
ALL OF THE HORRIBLE TIMES / PLACES WHEN I WAS SUBJECT TO SUCH MALICIOUSLY AND MEANNESS, I PROMISED MY MENTAL + EMOTIONAL HEALTH + QUALITY OF LIFE.
Compensative damages due to pain + suffering, emotional distress, and the ongoing mental distress AS A RESULT OF THIS 14 month Nightmare. My Set-backs cannot even begin to move towards a healthier State until this injustice is rectified.

A. ☐ Injunctive relief (specify what you want the Court to order):
B. ☒ Back pay. PUNATIVE DAMAGES (considering BACK PAY, WAGES AND SALARY, Pre T.B.D. OR Post interest, Front PAY, compensative AND PUNATIVE DAMAGES)
C. ☐ Reinstatement to former position.
D. ☒ Monetary damages in the amount of T.B.D.
E. ☐ That the Court appoint legal counsel.
F. ☒ Such relief as may be appropriate, including costs and attorney's fees.
G. ☒ Other (specify): MEDICAL EXPENSES / PRESCRIPTION EXPENSES, COMPENSATION FOR THE TIME LOST WORKING ON THIS COMPLAINT Money Lost, HOURS UNAVAILABLE FOR ME TO PURSUE WORK

I/We declare under penalty of perjury that the foregoing is true and correct.
that I have had to ignore 2 other many personal responsibilities and lead a normal or as close to normal as possible life,
Dated: 4-30-18
Tonya Marie Mannina
(Signature of Plaintiff)

(Signature of additional Plaintiff)

Working on this complaint for 10 months so far.

NOTICE
Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.